

Mood Disturbances

The use of some oncology therapies can lead to depression, anxiety, or other mood disorders. Although it is common to experience sadness or mood swings during therapy, depression is much more serious. You may not notice a change in your personality, but your loved ones may. Contact your physician immediately if you have any suicidal thoughts or thoughts about hurting yourself or others.

Your physician may conduct a baseline depression assessment to measure against as therapy progresses. Review with your doctor all medicines you are taking, as one of these may be causing your depression. Discuss any history of alcohol or drug use to prevent relapse. Monitoring and early intervention are important.

Consider joining a support group.

Signs of Clinical Depression

- > Fatigue that does not improve with rest.
- > Sleeping much more or much less than usual.
- > Continual, long-lasting feelings of sadness— anxious, tearful, irritable, or sad most of the day.
- > Hopelessness, despair.
- > Extreme mood swings.
- > Loss of interest in activities you used to love to do such as eating, socializing, sex, etc.
- > Feelings of guilt or worthlessness.
- > Problems thinking, concentrating, making decisions.
- > Eating more or less than usual or having lost or gained weight.
- > Having thoughts about death, giving up, wanting to die.

Speak to Your Doctor

- > Tell your doctor about any time you may have had depression in the past—mental status changes can be complicated by underlying depression and anxiety and fear related to anticipation of the effects of therapy.
- > Review with your doctor all medicines you are taking, as one of these may be causing your depression.
- > Patients with a history of alcohol or drug abuse should inform the treating physicians—monitoring and early intervention are important.
- > Be aware of any mood changes or thoughts about hurting yourself or others; inform your family members and doctor immediately.

Tips for Managing Depression

- > Your physician may prescribe an antidepressant or anti-anxiety drug. A difficult-to-treat case may require discontinuation of oncology treatment.
- > Try mild-to-moderate exercise. Prolonged bed rest and too much inactivity are not good for you, either physically or psychologically. Talk to your doctor about an exercise program that's right for you.
- > Try to be aware of the things that depress you and avoid such triggers if you can.
- > Consider joining a support group.
- > If you are anxious about participating in a group, find yourself a personal therapist, such as a psychiatrist, psychologist, or spiritual advisor.
- > If you feel tired make sure you get enough rest.
- > Take a walk in the park or on the sidewalk in front of your home.
- > Increase your fluid intake, but do not drink alcohol or caffeinated beverages.
- > If you are irritable, confused, or cannot concentrate as well as you used to, take it slowly. If your memory is unreliable, make lists.
- > Remember, your treatment does not go on forever.

This information is not intended as a substitute for professional medical advice. Consult your health care provider for individualized information about your therapy. Your health care provider should be your primary source of information about your medical condition and treatment.

